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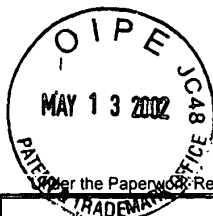
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| <b>TRANSMITTAL FORM</b><br><br>(to be used for all correspondence after initial filing) |   | Application Number   | 09/626,526    |
|   |   | Filing Date  | July 27, 2000 |
|   |   | First Named Inventor   | GREEN et al.  |
|   |   | Group Art Unit   | 2881          |
|   |   | Examiner Name  | C. H. Jackson |
| Total Number of Pages in This Submission  | 11  | Attorney Docket Number   | NUFO-021      |
| <b>ENCLOSURES (check all that apply)</b>  |   |  |               |
| <input checked="" type="checkbox"/> Fee Transmittal Form                                | <input type="checkbox"/> Assignment Papers (for an Application)                         | <input type="checkbox"/> After Allowance Communication to Group                            |               |
| <input type="checkbox"/> Fee Attached   | <input type="checkbox"/> Drawing(s)   | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences        |               |
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| <input type="checkbox"/> Affidavits/declaration(s)                                      | <input type="checkbox"/> Petition to Convert to a Provisional Application               | <input type="checkbox"/> Status Letter   |               |
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| <input type="checkbox"/> Response to Missing Parts/Incomplete Application               | Remarks   |  |               |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53            |   |  |               |
| <b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>                                       |   |  |               |
| Firm or Individual Name   | ROBERT C. HALL, Reg. No. 39,209   |  |               |
| Signature   |   |  |               |
| Date  | 05/03/02  |  |               |

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| Typed or printed name  | Teri Muir   |
| Signature  |             |
| Date   | MAY 3, 2002 |

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| FEE TRANSMITTAL<br>for FY 2002  |                       | Complete if Known  |                       |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
|---|-----------------------|--|-----------------------|--|-----------------------|-----------------------|-----------------|----------|----------|------------------------|-------|-------|-------------------------------------|--------------------|-----|-----------------------------------|-----|-----|--|-----|-----|---------------------------------------|-----|-----|---------------------------|-----|-----|--|-----|-------|--|-----|-----|--|-----|------------------------|---|--|-----|--------|-----|--------|---|--|-----|-----|-----|----|--|--------|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|-----|-------|-----|-----|---|--|-----|-------|-----|-----|--|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|--------------------------|--|-----|-------|-----|-------|---|--|-----|-----|-----|----|----------------------------------|--|-----|-------|-----|-----|------------------------------------|--|-----|-------|-----|-----|--------------------------------|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|-----------------|--|-----|-----|-----|-----|-------------------------------|--|-----|----|-----|----|-------------------------------------|--|-----|-----|-----|-----|---|--|-----|----|-----|----|--|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|---|--------|-----|-----|-----|-----|---|--|---------------------------|--|--|--|--|--------------------------|--|--|--|--|
| Patent fees are subject to annual revision.   |                       | Application Number   | 09/626,526            |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
|   |                       | Filing Date  | July 27, 2000         |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
|   |                       | First Named Inventor   | GREEN et al.          |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
|   |                       | Examiner Name  | C. H. Jackson         |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
|   |                       | Group Art Unit   | 2881                  |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
|   |                       | Attorney Docket No.  | NUFO-021              |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| TOTAL AMOUNT OF PAYMENT (\$)  |                       | 1596.00  |                       |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| METHOD OF PAYMENT   |                       | FEE CALCULATION (continued)  |                       |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit overpayments to:<br/>Deposit Account Number 50-0815<br/>Deposit Account Name Bozicevic, Field &amp; Francis LLP<br/><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17<br/><input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27</p> <p>2. <input type="checkbox"/> Payment Enclosed:<br/><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>   |                       | <p>3. ADDITIONAL FEES</p> <table border="1"><thead><tr><th>Fee Code</th><th>Large Entity Fee (\$)</th><th>Small Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr><tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr><tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr><tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr><tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examination action</td><td></td></tr><tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr><tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td>110.00</td></tr><tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for reply within second month</td><td></td></tr><tr><td>117</td><td>920</td><td>217</td><td>460</td><td>Extension for reply within third month</td><td></td></tr><tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td><td></td></tr><tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr><tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td></td></tr><tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr><tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td><td></td></tr><tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr><tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr><tr><td>141</td><td>1,280</td><td>241</td><td>640</td><td>Petition to revive - unintentional</td><td></td></tr><tr><td>142</td><td>1,280</td><td>242</td><td>640</td><td>Utility issue fee (or reissue)</td><td></td></tr><tr><td>143</td><td>460</td><td>243</td><td>230</td><td>Design issue fee</td><td></td></tr><tr><td>144</td><td>620</td><td>244</td><td>310</td><td>Plant issue fee</td><td></td></tr><tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr><tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr><tr><td>126</td><td>180</td><td>126</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr><tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr><tr><td>146</td><td>740</td><td>246</td><td>370</td><td>For each additional invention to be examined (37 CFR § 1.129(a))</td><td></td></tr><tr><td>149</td><td>740</td><td>249</td><td>370</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td></td></tr><tr><td>179</td><td>740</td><td>279</td><td>370</td><td>Request for Continued Examination (RCE)</td><td>740.00</td></tr><tr><td>169</td><td>900</td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr><tr><td colspan="5">Other fee (specify) _____</td></tr><tr><td colspan="5">SUBTOTAL (3) (\$) 850.00</td></tr></tbody></table> |                       | Fee Code   | Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description | Fee Paid | 105      | 130                    | 205   | 65    | Surcharge - late filing fee or oath |                    | 127 | 50                                | 227 | 25  | Surcharge - late provisional filing fee or cover sheet |     | 139 | 130                                   | 139 | 130 | Non-English specification |     | 147 | 2,520  | 147 | 2,520 | For filing a request for <i>ex parte</i> reexamination |     | 112 | 920*   | 112 | 920*                   | Requesting publication of SIR prior to Examination action |  | 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action |  | 115 | 110 | 215 | 55 | Extension for reply within first month | 110.00 | 116 | 400 | 216 | 200 | Extension for reply within second month |  | 117 | 920 | 217 | 460 | Extension for reply within third month |  | 118 | 1,440 | 218 | 720 | Extension for reply within fourth month |  | 128 | 1,960 | 228 | 980 | Extension for reply within fifth month |  | 119 | 320 | 219 | 160 | Notice of Appeal |  | 120 | 320 | 220 | 160 | Filing a brief in support of an appeal |  | 121 | 280 | 221 | 140 | Request for oral hearing |  | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding |  | 140 | 110 | 240 | 55 | Petition to revive - unavoidable |  | 141 | 1,280 | 241 | 640 | Petition to revive - unintentional |  | 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) |  | 143 | 460 | 243 | 230 | Design issue fee |  | 144 | 620 | 244 | 310 | Plant issue fee |  | 122 | 130 | 122 | 130 | Petitions to the Commissioner |  | 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) |  | 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt |  | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) |  | 146 | 740 | 246 | 370 | For each additional invention to be examined (37 CFR § 1.129(a)) |  | 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) | 740.00 | 169 | 900 | 169 | 900 | Request for expedited examination of a design application |  | Other fee (specify) _____ |  |  |  |  | SUBTOTAL (3) (\$) 850.00 |  |  |  |  |
| Fee Code  | Large Entity Fee (\$) | Small Entity Fee (\$)  | Fee Description       | Fee Paid   |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 105   | 130                   | 205  | 65                    | Surcharge - late filing fee or oath  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 127   | 50                    | 227  | 25                    | Surcharge - late provisional filing fee or cover sheet                     |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 139   | 130                   | 139  | 130                   | Non-English specification  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 147   | 2,520                 | 147  | 2,520                 | For filing a request for <i>ex parte</i> reexamination                     |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 112   | 920*                  | 112  | 920*                  | Requesting publication of SIR prior to Examination action                  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 113   | 1,840*                | 113  | 1,840*                | Requesting publication of SIR after Examiner action                        |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 115   | 110                   | 215  | 55                    | Extension for reply within first month                                     | 110.00                |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 116   | 400                   | 216  | 200                   | Extension for reply within second month                                    |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 117   | 920                   | 217  | 460                   | Extension for reply within third month                                     |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 118   | 1,440                 | 218  | 720                   | Extension for reply within fourth month                                    |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 128   | 1,960                 | 228  | 980                   | Extension for reply within fifth month                                     |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 119   | 320                   | 219  | 160                   | Notice of Appeal   |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 120   | 320                   | 220  | 160                   | Filing a brief in support of an appeal                                     |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 121   | 280                   | 221  | 140                   | Request for oral hearing   |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 138   | 1,510                 | 138  | 1,510                 | Petition to institute a public use proceeding                              |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 140   | 110                   | 240  | 55                    | Petition to revive - unavoidable   |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 141   | 1,280                 | 241  | 640                   | Petition to revive - unintentional   |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 142   | 1,280                 | 242  | 640                   | Utility issue fee (or reissue)   |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 143   | 460                   | 243  | 230                   | Design issue fee   |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 144   | 620                   | 244  | 310                   | Plant issue fee  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 122   | 130                   | 122  | 130                   | Petitions to the Commissioner  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 123   | 50                    | 123  | 50                    | Processing fee under 37 CFR 1.17(q)  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 126   | 180                   | 126  | 180                   | Submission of Information Disclosure Stmt                                  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 581   | 40                    | 581  | 40                    | Recording each patent assignment per property (times number of properties) |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 146   | 740                   | 246  | 370                   | For each additional invention to be examined (37 CFR § 1.129(a))           |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 149   | 740                   | 249  | 370                   | For each additional invention to be examined (37 CFR § 1.129(b))           |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 179   | 740                   | 279  | 370                   | Request for Continued Examination (RCE)                                    | 740.00                |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 169   | 900                   | 169  | 900                   | Request for expedited examination of a design application                  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| Other fee (specify) _____   |                       |  |                       |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| SUBTOTAL (3) (\$) 850.00  |                       |  |                       |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 2. BASIC FILING FEE   |                       |  |                       |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| <table border="1"><thead><tr><th>Large Entity Fee Code</th><th>Small Entity Fee Code</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>101</td><td>740</td><td>201</td><td>370</td><td>Utility filing fee</td><td></td></tr><tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td></td></tr><tr><td>107</td><td>510</td><td>207</td><td>255</td><td>Plant filing fee</td><td></td></tr><tr><td>108</td><td>740</td><td>208</td><td>370</td><td>Reissue filing fee</td><td></td></tr><tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="4">SUBTOTAL (1)</td><td></td></tr></tbody></table>  |                       | Large Entity Fee Code  | Small Entity Fee Code | Fee Description  | Fee Paid              | 101                   | 740             | 201      | 370      | Utility filing fee     |       | 106   | 330                                 | 206                | 165 | Design filing fee                 |     | 107 | 510  | 207 | 255 | Plant filing fee                      |     | 108 | 740                       | 208 | 370 | Reissue filing fee                                 |     | 114   | 160  | 214 | 80  | Provisional filing fee                                     |     | SUBTOTAL (1)           |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| Large Entity Fee Code   | Small Entity Fee Code | Fee Description  | Fee Paid              |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 101   | 740                   | 201  | 370                   | Utility filing fee   |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 106   | 330                   | 206  | 165                   | Design filing fee  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 107   | 510                   | 207  | 255                   | Plant filing fee   |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 108   | 740                   | 208  | 370                   | Reissue filing fee   |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 114   | 160                   | 214  | 80                    | Provisional filing fee   |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| SUBTOTAL (1)  |                       |  |                       |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 1. EXTRA CLAIM FEES   |                       |  |                       |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| <table border="1"><thead><tr><th>Total Claims</th><th>Extra Claims</th><th>Fee from below</th><th>Fee Paid</th></tr></thead><tbody><tr><td>24 - 20**</td><td>= 14 x</td><td>18.00</td><td>= 252.00</td></tr><tr><td>Indep. Claims 5-3**</td><td>= 6 x</td><td>84.00</td><td>= 504.00</td></tr><tr><td>Multiple Dependent</td><td></td><td></td><td></td></tr></tbody></table>   |                       | Total Claims   | Extra Claims          | Fee from below   | Fee Paid              | 24 - 20**             | = 14 x          | 18.00    | = 252.00 | Indep. Claims 5-3**    | = 6 x | 84.00 | = 504.00                            | Multiple Dependent |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| Total Claims  | Extra Claims          | Fee from below   | Fee Paid              |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 24 - 20**   | = 14 x                | 18.00  | = 252.00              |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| Indep. Claims 5-3**   | = 6 x                 | 84.00  | = 504.00              |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| Multiple Dependent  |                       |  |                       |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| <table border="1"><thead><tr><th>Large Entity Fee Code</th><th>Small Entity Fee Code</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr><tr><td>102</td><td>84</td><td>202</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>104</td><td>280</td><td>204</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr><tr><td>109</td><td>84</td><td>209</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr><tr><td>110</td><td>18</td><td>210</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="4">SUBTOTAL (2) \$ 746.00</td></tr></tbody></table> |                       | Large Entity Fee Code  | Small Entity Fee Code | Fee Description  | Fee Paid              | 103                   | 18              | 203      | 9        | Claims in excess of 20 |       | 102   | 84                                  | 202                | 42  | Independent claims in excess of 3 |     | 104 | 280  | 204 | 140 | Multiple dependent claim, if not paid |     | 109 | 84                        | 209 | 42  | ** Reissue independent claims over original patent |     | 110   | 18   | 210 | 9   | ** Reissue claims in excess of 20 and over original patent |     | SUBTOTAL (2) \$ 746.00 |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| Large Entity Fee Code   | Small Entity Fee Code | Fee Description  | Fee Paid              |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 103   | 18                    | 203  | 9                     | Claims in excess of 20   |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 102   | 84                    | 202  | 42                    | Independent claims in excess of 3  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 104   | 280                   | 204  | 140                   | Multiple dependent claim, if not paid                                      |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 109   | 84                    | 209  | 42                    | ** Reissue independent claims over original patent                         |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| 110   | 18                    | 210  | 9                     | ** Reissue claims in excess of 20 and over original patent                 |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| SUBTOTAL (2) \$ 746.00  |                       |  |                       |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |
| **or number previously paid, if greater; For Reissues, see above.   |                       | *Reduced by Basic Filing Fee Paid  |                       |  |                       |                       |                 |          |          |                        |       |       |                                     |                    |     |                                   |     |     |  |     |     |                                       |     |     |                           |     |     |  |     |       |  |     |     |  |     |                        |   |  |     |        |     |        |   |  |     |     |     |    |  |        |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |        |     |     |     |     |   |  |                           |  |  |  |  |                          |  |  |  |  |

| SUBMITTED BY      |                | Complete (if applicable)          |                |
|-------------------|----------------|-----------------------------------|----------------|
| Name (Print/Type) | ROBERT C. HALL | Registration No. (Attorney/Agent) | 39,209         |
| Signature         |                | Telephone                         | (650) 327-3400 |
|                   |                | Date                              | 05/03/02       |

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

#10/C  
7-202  
R. Drake

In re application of: Green et al.

Serial No.: 09/626,526

Filed: July 27, 2000

For: METHOD AND APPARATUS FOR  
FILTERING AN OPTICAL BEAM

Art Unit: 2881

Examiner: Jackson, C.

Atty ref.: NUFO-021

Date of Deposit: MAY 3, 2002

Teri Muir

Signature

Teri Muir

Typed or Printed Name

AMENDMENT

Assistant Commissioner for Patents  
Washington DC 20231

COPY OF PAPERS  
ORIGINALLY FILED

Sir:

This amendment is accompanied by a Request for Continued Prosecution, and is responsive to the Office Action dated December 4, 2001 for which a three-month period for response was given making this response due on or before March 4, 2001. A Petition for a 2-Month Extension of Time is submitted herewith, making this amendment due on or before May 4, 2002. Accordingly, this response is timely filed.

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In view of the remarks put forth below, reconsideration and allowance are respectfully requested.

IN THE CLAIMS

Please cancel claims 59-87 without prejudice, and replace therefore the following new claims.

Sub  
D1  
C1

88. (New) A tunable filter apparatus, comprising:
- (a) a grid generator positioned in an optical path and configured to generate a first plurality of transmission peaks corresponding to channels within a selected wavelength range; and
  - (b) a channel selector positioned in said optical path and configured to generate a second plurality of transmission peaks within said wavelength range.

05/16/2002 MGBREM1 00000036 500815 09626526

01 FC:102 504.00 CH

02 FC:103 252.00 CH